FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL 3235-0076 OMB Number: Expires: April 30, 2008 Estimated average burden hours per response . . . 16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						
	1 .					

Name of Offering (check if this is an American Pegasus Fixed Income Fund -	amendment and name has changed, and indicate change.) Series IV Plus
Filing Under (Check box(es) that apply)	Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Ame	ndment
	A. BASIC IDENTIFICATION DATA
1. Enter the information requested about	the issuer
Name of Issuer (check if this is an am American Pegasus Fixed Income Fund -	endment and name has changed, and indicate change.) Series IV Plus
Address of Executive Offices 505 Montgomery Street, 11th Floor, San	
Address of Principal Business Operation	s (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
(if different from Executive Offices)	DDOCECCED
Brief Description of Business	PROCESSED
Investment Fund	JAN 1 0 2007
Type of Business Organization	
□ corporation	☐ limited partnership, already formed thomson ☐ other (please specify): A segregated portfolio
□ business trust	imited partnership, to be formed of American Pegasus SPC a Cayman Islands exempted company
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organiza	on or Organization: Month Year
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offerin 77d(6).	g of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C.
When to File: A notice must be filed no later Commission (SEC) on the earlier of the date id date it was mailed by United States registered	than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange t is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

DEC 2 8 2006

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Executive Officer Director General and/or Beneficial Owner Managing Partner Full Name (Last name first, if individual) Chui, Benjamin Pui-Yun Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 11th Floor, San Francisco, CA 94111 ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Seymour, Tammy Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 31910 SMB, 2nd Floor, Ansbacher House, 20 Genesis Close, George Town, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Brinkley, Blair Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 31910 SMB, 2nd Floor, Ansbacher House, 20 Genesis Close, George Town, Grand Cayman, Cayman Islands ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

						B. INF	ORMA'	FION A	BOUT	OFFE	RING			_	
					•	, .	_				_	_			
														Yes	No
1. Has	the issu	er sold,	or does	the issu	ier inter	nd to sel	l. to non	-accred	ited inv	estors in	this of	fering?			\boxtimes
		,						1						_	_
					Answer	also in	Append	lix, Coli	ımn 2, i	ffiling	under U	LOE.			
2. Wha	t is the	minimu	m inves	tment t	hat will	be acce	pted fro	m any ii	ndividua	al?			9	S 25	5,000
							•								
				_										Yes	No
3. Doe	s the of:	fering p	ermit jo	int own	ership o	t a sing	le unit?							\boxtimes	Ш
com offer and/	mission ring. If or with	or sim a perso a state	ilar rem n to be or state	uneration listed is s, list th	on for s s an ass ne name	olicitati ociated of the	on of p person broker	urchase or agen or deale	rs in co t of a b r. If mo	onnection roker of ore than	n with r dealer five (5)	sales of a registere persons	or indirectly, any securities in the securities in the securities to be listed are dealer only.		
Full N	ame (La	ast name	first, if	individ	ual)			,							
Busine	ss or R	esidence	Addre	ss (Num	ber and	Street,	City, St	ate, Zip	Code)						
		George'													: .
		ciated E													
		vestmen													
		h Perso											.		
•		States					_						∐ A	ll States	
[AL]	(AK) [IN]	[AZ] [IA]	(AR) [KS]	[CA] [KY]	[CO]	[CT] [ME]	[DE]	[DC] [MA]	[FL] [MI]	[GA] [MN]	(HI) [MS]	[ID] [MO]			
[TM]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full N	ame (La	ast name	first, if	individ	ual)										
D i	D	esidence	. A .d.d	(NI	1. a	C+4	C:L. C.	7:	C- 1-)					•	
Dusine	22 OI K	esidence	Audie	ss (muii	ibei allu	Succi,	City, St	aic, Zip	Code)					*	
Name	of Asso	ciated E	Broker o	r Dealer	-		ţ								
States	in Whic	h Perso	n Listed	Has Sc	licited o	or Inten	ds to So	licit Pur	chasers						
(Chec	k "All	States	" or cl		dividu	al Stat		, 					📮 A	ll States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[RS]	[OM]			
[MT] [RI]	[NE]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [UT]	[NY] [VT]	[NC]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]			
		ist name					,			[,,]	1,,,,,				
Busine	ss or Re	esidence	Addres	ss (Num	ber and	Street,	City, St	ate, Zip	Code)					-	
Name	of Asso	ciated E	Broker o	r Dealer	•										_
States	in Whic	h Perso	n Listed	Has Sc	licited o	or Inten	ds to So	licit Pur	chasers				· · · · · · · · · · · · · · · · · · ·		
(Chec	k "All	States	" or ch	neck in	dividu	al Stat	es)		•••••		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	🔲 A	Il States	i
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[IM]	[MN]	[MS]	[OM]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

[UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

[RI] [SC] [SD] [TN] [TX]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

already sold. Enter "0" if answer is "none" or "zero." If the ing, check this box and indicate in the columns below	e transaction is an exchange offer-	*	
fered for exchange and already exchanged.			
Type of Security		Aggregate	Amount Already
Debt		Offering Price \$	Sold \$
Equity		· · ·	\$ 15,168,205
Equity Common		\$500,000,000	<u> 13,108,203</u>
Convertible Securities (including warrants)		\$	\$
Partnership Interests			\$
Other (Specify			\$
•			
Total		\$ 500,000,000	\$ 15,168,205
Answer also in Appendix, Column 3, if filing 2. Enter the number of accredited and non-accredited investor this offering and the aggregate dollar amounts of their purposes of their purposes on the total lines. Enter "0" if answer also in Appendix, Column 3, if filing 2. Enter the number of persons who have purchased amount of their purchases on the total lines. Enter "0" if answer also in Appendix, Column 3, if filing 2. Enter the number of accredited and non-accredited investor this purchase are the number of accredited and non-accredited investor this offering and the aggregate dollar amounts of their purchases.	s who have purchased securities in irchases. For offerings under Rule securities and the aggregate dollar		
		Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors			\$ <u>15,168,205</u>
Non-accredited Investors			\$
Total (for filings under Rule 504 only)			\$
Answer also in Appendix, Column 4, if filing	ig under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter securities sold by the issuer, to date, in offerings of the months prior to the first sale of securities in this offering in Part C-Question 1. Type of offering	er the information requested for all types indicated, the twelve (12)	Type of	Dollar Amount
Type of offering		Security	Sold
Rule 505		•	\$
Regulation A			\$
Rule 504			\$
Total			\$
4. a. Furnish a statement of all expenses in connection with t securities in this offering. Exclude amounts relating solel issuer. The information may be given as subject to future expenditure is not known, furnish an estimate and check the	y to organization expenses of the contingencies. If the amount of an		
Transfer Agent's Fees			\$
Printing and Engraving Costs		⊠	\$ 5,000
Legal Fees		⊠	\$ 15,000
Accounting Fees		_	\$
Engineering Fees			\$
Sales Commissions (specify finders' fees separately)			\$
Other Expenses (identify) Blue sky expenses		_ ⊠	\$
Total		_ ⊠	\$ 25,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C -Ouestion 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$499,975,000 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Payments To Affiliates Others Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer Other (specify): Invest, reinvest and trade in securities **№** \$499,975,000 □ \$.___ □ \$__ Total Payments Listed (column totals added) ☑ \$ 499,975,000 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Signature Date 10/25/2006 American Pegasus Fixed Income Fund - Series IV Plus Name of Signer (Print or Type) Title of Signer (Print or Type) Benjamin P. Chui Director

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)